

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare:

that my residence, post office address and citizenship are as stated below next to my name: that I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought in the application entitled:

"REMOTE ACCESS MEDICAL IMAGE EXCHANGE SYSTEM AND METHODS OF OPERATION THEREFOR"

which application is:

X the attached application
(for original application)

_____ application Serial No. _____
filed _____, and amended on _____
(for declaration not accompanying application)

that I have reviewed and understand the contents of the specification of the above-identified application, including the claims, as amended by an amendment referred to above;
that I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application under 37 C.F.R. 1.56;
that I hereby claim foreign priority benefits under Title 35, United States Code §119, §172 or §365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified on said list any foreign application for patent or inventor's certificate on this invention having a filing date before that of the application on which priority is claimed:

Application Number	Country	Filing Date	Priority Claimed (yes or no)
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I hereby claim the benefit of Title 35, United States Code §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in a listed prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge my duty to disclose any material information under 37 C.F.R. 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
60/017,316	May 13, 1996	pending

I hereby appoint Raymond H. J. Powell, Jr., Reg. No. 34,231, and Robert A. Westerlund, Jr, Reg. No. 31,439, my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and request that all correspondence about the application be addressed to:

Raymond H. J. Powell, Jr.
P.O. Box 30269
Alexandria, Virginia 22310-0269.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date: <u>May 11, 1997</u>	First Inventor:	Andrew L. DiRienzo
Residence: <u>Same as Post Office</u>	Signature:	<u>Andrew L. DiRienzo</u>
Address: _____	Post Office Address:	<u>118 Weaver Road, Elizaville, NY, USA 12523</u>
Citizenship: <u>United States</u>		

[] One or more additional inventors are being named on separately numbered sheets attached hereto.

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) & 1.27(b))--INDEPENDENT INVENTOR**

Docket Number (Optional)
RAMIX-001US

Applicant or Patentee: Andrew L. DiRienzo

Application or Patent No.: _____

Filed or Issued: _____

Title: **REMOTE ACCESS MEDICAL IMAGING EXCHANGE
SYSTEM AND METHODS OF OPERATION THEREFOR**

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in:

- ☒ the specification filed herewith with title as listed above.
☐ the application identified above.
☐ the patent identified above.

I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☒ No such person, concern, or organization exists.
☐ Each such person, concern, or organization is listed below.

Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Andrew L. DiRienzo

NAME OF INVENTOR

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Signature of inventor

Signature of inventor

Signature of inventor

Date

Date

Date